

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

-----X

ARNULFO CALDERON,

Index No.: 08 CIV 0922

Plaintiff,

**ADMENDED RETURN
OF SERVICE**

• against

UNITED STATES OF AMERICA,

Defendant.

New York State)

County of Nassau:)

Donald D. Olman, being duly sworn deposes and says that: Service of the Summons and Complaint in the above entitled action was served by the undersigned, as follows:

1. Upon the Civil Process Clerk for the United States Attorney for the Southern District of New York, **personally** at 86 Chambers Street, New York 10007, on January 28, 2008 and by **certified mail**, on January 28, 2008, a copy of the return receipt of which is annexed hereto.
2. Upon the Hon. Michael Mukasey, Attorney General of the United States, by **certified mail** on January 28, 2008, a copy of the return receipt of which is annexed hereto.

Donald D. Olman

Duly Sworn to before me this 12th
day of February, 2008

Linda Pellitteri

Notary Public-State of New York
#01PE495317Nassau County
Expires July 3, 2011

Donald D. Olman, firm of
Rassner, Rassner and Olman
14 Tower Place
Roslyn, New York 11576

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CIVIL PROCESS CLERK
 United States Attorney
 for the Southern District of
 New York
 86 Chambers Street
 New York, N.Y. 10007
 Third Floor

2. Article Number

(Transfer from service label)

7006 2150 0003 4213 7557

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X G. Rosado

 Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

1/29/08

D. Is delivery address different from item 1?

 Yes
 No

If YES, enter delivery address below:

3. Service Type

 Certified Mail

 Express Mail

 Registered

 Return Receipt for Merchandise

 Insured Mail

 C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes
 SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Hon. Michael Mukasey
 Attorney General of the
 United States
 U.S. Dept. of Justice
 950 Pennsylvania Ave.
 Washington, D.C. 20530-
 0001

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X James A. Parisi

 Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

02-4-08

D. Is delivery address different from item 1?

 Yes
 No

3. Service Type

 Certified Mail

 Express Mail

 Registered

 Return Receipt for Merchandise

 Insured Mail

 C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

Article Number

(Transfer from service label)

7006 2150 0003 4213 7564

7564

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

